

# FY2015 CHNA&HIP Progress Report

## Shelby County

### Community Health Improvement Plan

GOAL	Strategies	Progress on Strategies
<p>Increase access and use of behavioral health services in the school aged population as evidenced by decreased the following indicator results on the Iowa Youth Survey:</p> <p>1. In the last 12 months did you make a plan about how you would attempt suicide? 2008 Baseline: 4% of sixth graders, 6% of 8th graders and 14% of 11th graders answered yes. Goal is to decrease by 50% in all grades by 2014.</p> <p>2. At school in the last 30 days, how many times were you hit, kicked, pushed, shoved around, or locked indoors? 2008 Baseline: 20% of sixth graders, 19% of 8th graders and 10% of 11th graders answered 1 or more times. Goal is to decreased by 50% in all grades by 2014.</p> <p>3. In the past 12 months, how often have you been disciplined at school for fighting, theft, or damaging property? 2008 Baseline: 5% of sixth graders, 9% of 8th graders and 8% of 11th graders answered 1 or more times. Goal is to decrease by 50% in all grades by 2014.</p> <p>4. I feel safe at school? 2008 Baseline: 10% of sixth graders, 14% of 8th graders and 10% of 11th graders disagreed with this statement. Goal is to decrease by 50% in all grades by 2014.</p>	<p>Identify specific needs of the targeted population related to behavioral disorders and/or mental illness.</p>	<p>Referrals for mental health services continue to be received from school personnel, medical providers, parents and others. Behavioral Counseling continues to be done at school sites as well as in the Behavioral Health office to those students identified by school staff as being in need as evidenced by: behavioral issues at school or at home, depression, law enforcement involvement in alcohol or drug related issues. Parents who call the school to discuss their child's issues at home may also be referred. Medication management visits are also provided for those children who have depression, ADD, ADHD, etc. at the Behavioral Health office. These children also receive counseling. Staff continues to conduct Circle of Support group sessions and addresses topics such as bullying and depression. Primary care providers at Myrtue Medical Center incorporate depression screening into the electronic health record with the screening done by nurses or the provider and reviewed by provider. Referrals are made for patients identified at high-risk for depression. Myrtue Medical Center held a community stakeholder forum on May 7, 2014 and mental health was discussed and incorporated in the HIP. A mental health work group has been active and meeting looking at interventions and review needs and plans. Two new psychiatrists are joined the staff at Mental Health and an ARNP to improve access to services. The Director of Public Health has reviewed the Iowa Youth Survey, State of Iowa Results, 2014. The questions used in 2014 survey do not match the questions/response data from 2008 so difficult to compare and determine outcomes. Question 2 is the same and results from 2014 are: 6th grade 18%; 8th grade 16%; 11th grade 8%. The goal to decrease by 50% is not met. Analysis taken from the report indicates bullying in Iowa is still predominating: 2014 IYS Questions: E12; E13; E14; E15; E16; E17; E19; E20 are used to determine bullying. Examples include: In the last 30 days, how many times have you been bullied at school in the ways listed: I was called names, was made fun of, or teased in a hurtful way; other students left me out of things on purpose, excluded me from their group of friends, or completely ignored me; I was hit, kicked, pushed, shoved around, or locked indoors; other students told lies, spread false rumors about me, and tried to make others dislike me; I was made fun of because of my race or color; I was made fun of because of my religion; other students made sexual jokes, comments, or gestures that hurt my feelings; I have received a threatening or hurtful message from another student in an email, on a website, on a cell phone, from text messaging, in an internet chat room, or in instant messaging. Between 40 and 66% respond unfavorably indicating a concern. Social media in relationship to bullying was also added.</p>

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	Identify all programs/providers/funders in Shelby County for capacity to deliver behavioral health services and develop plans to increase behavioral health services.	A new regional structure for mental health services began in 2014. Shelby County is able to utilize regional dollars approved through regional staff to provide mental health services for residents of the county. A CEO for the SWIA Mental Health Region is in place. The regional team is looking at payment processes and crisis intervention plans. Local staff has attended and participated in work groups including the director of Public Health and the director of Mental Health.
	Add available community behavioral health services to local resource book and distribute to area businesses to display on their websites for employee and resident education.	The Shelby County Human Resource Directory was updated and printed in 2014. The directory was sent out to local community members via the newspaper and is posted electronically on Myrtue Medical Center's website and distributed widely within the county. Resource book is shared with community partners such as schools and daycares. A supply is available in the Public Health office.
	Educate community on availability of behavioral health services and potential EAP services in Shelby County to include, but not limited to the following methods or entities: ISU Extension, Farm Bureau, Iowa Western Community College, school newsletters, life skills classes, churches, community and civic groups, Chamber of Commerce, pay check stuffers, various websites, school functions, publications, advertising, and press releases.	Advertising about the Employee Assistance Program (EAP) has been done over the last year to local businesses in Shelby County as a resource to employees and their families. The BH department has offered yearly education regarding EAP. BH offered an in-service series on personal and workplace boundaries for staff at MMC and the public. A community program on depression was held in November of 2014 and was well-attended and well-received by the community. A media campaign was done regarding depression in 2014. Lunch and learns have been held at local businesses including the school.
	Identify businesses who do not offer Employee Assistance Program (EAP) services and educate owners on available benefits. Educate public regarding the availability of EAP services at their place of employment.	Have expanded community wellness offerings to the work place in Shelby County.
	Offer re-education/reinforcement to employees of existing businesses that offer EAP to their employees regarding EAP services.	Information included in benefits job fair at Myrtue Medical Center for staff.

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	Meet with local and administrative staff from Jackson Recovery Center to discuss availability and access issues for drug and alcohol evaluations and treatment in Shelby County. Keep Shelby County Board of Health and Board of Supervisors aware of progress and needs.	A meeting with Jackson Recovery was held. BH at Myrtue Medical Center is continuing their plans to become an accredited Drug and Alcohol treatment program.
	Continue with current initiatives by MMC and Harlan Community School District to provide school based behavioral health services.	Counselors are in the schools two days per week providing services to children in need and about sixty children are seen each month within the school system. Issues being treated include depression, anxiety, pornography, and suicidal thoughts. Children are referred by local school personnel and parents and others.
	Invite stakeholders to identify possible subsidies for school based services to include but not limited to: Harlan Community School system, Jackson Recovery, Myrtue Medical Center, West Central Community Action, Chamber of Commerce, ISU Extension, Iowa Department of Public Health (bullying \$), private companies, Decat grant, empowerment board, drug companies, Myrtue Medical Center Auxiliary, service organizations, Iowa West Foundation, ministerial association, pharmaceutical companies, Victims Services, Shelby County Central Points Coordinator, and Shelby County Community Chest.	Mental Health services in Iowa have been undergoing redesign over the past 12 months. Monies are obtained from the regional staff for direct services now as opposed to county-based funding. Billing practices and processes within the Behavioral Health Department have been revised over the past year. Clients are assisted to apply for health insurance. BH utilizes a sliding fee scale for patient fees once insurance has been accessed. Adequate funding is an on-going issue in providing mental health services with low reimbursement rates for mental health services. Local dollars are utilized when and where possible. MMC provides in-kind monies to maintain a mental health department.
	Evaluate the need for and increase professional staffing at Myrtue Medical Center Behavioral Health as indicated.	BH department of MMC added one FTC staff member as a patient care specialist and also hired a full-time Medical Social Worker after graduation. Two psychiatrists are available and an ARNP credentialed in mental health services. MMC is looking at ongoing service provider needs in mental health. Myrtue Medical Center completed a CHNA/HIP process in 2014 and mental health strategies were incorporated.